

BEST AVAILABLE COPY

<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="margin: 0;">MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO 875)</p> </div> <div style="width: 35%;"> <p style="margin: 0; font-size: small;">SERIAL NO. </p> <p style="margin: 0; font-size: small;">FILING DATE </p> <p style="margin: 0; font-size: small;">APPLICANT(S) </p> </div> </div>						
CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		/				
3		/				
4		/				
5		/				
6		/				
7		/				
8		/				
9		/				
10		/				
11		/				
12		/				
13		/				
14		/				
15		/				
16		/				
17		/				
18		/				
19		/				
20		/				
21		/				
22		/				
23		/				
24		/				
25		/				
26		/				
27		/				
28		/				
29		/				
30		/				
31		/				
32		/				
33		/				
34	/					
35		/				
36		/				
37		/				
38	/					
39		/				
40		/				
41		/				
42		/				
43		/				
44		/				
45		/				
46		/				
47		/				
48		/				
49		/				
50		/				
TOTAL IND	3					
TOTAL DEP		47				
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
51		/				
52		/				
53		/				
54		/				
55		/				
56		/				
57		/				
58		/				
59		/				
60		/				
61		/				
62	/					
63		/				
64		/				
65		/				
66		/				
67		/				
68		/				
69		/				
70		/				
71		/				
72		/				
73		/				
74		/				
75		/				
76		/				
77		/				
78		/				
79		/				
80		/				
81		/				
82		/				
83		/				
84		/				
85		/				
86		/				
87	/					
88		/				
89		/				
90		/				
91		/				
92		/				
93		/				
94		/				
95		/				
96		/				
97		/				
98		/				
99		/				
100		/				
TOTAL IND	2					
TOTAL DEP		48				
TOTAL CLAIMS						

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO 875)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
CLAIMS								
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND	DEP	IND	DEP	IND	DEP	IND	DEP
		1						
102		1						
103		1						
104		1						
105		1						
106	1							
109		1						
110		1						
111		1						
112		1						
113		1						
114		1						
115		1						
116		1						
117		1						
118		1						
119	1	1						
120		1						
121		1						
122		1						
123		1						
124		1						
125		1						
126		1						
127	1							
128		1						
129		1						
130								
131								
132								
133								
134								
135								
136								
137								
138								
139								
140								
141								
142								
143								
144								
145								
146								
147								
148								
149								
150								
TOTAL IND	3							
TOTAL DEP	26							
TOTAL CLAIMS								
51								
52								
53								
54								
55								
56								
57								
58								
59								
60								
61								
62								
63								
64								
65								
66								
67								
68								
69								
70								
71								
72								
73								
74								
75								
76								
77								
78								
79								
80								
81								
82								
83								
84								
85								
86								
87								
88								
89								
90								
91								
92								
93								
94								
95								
96								
97								
98								
99								
100								
TOTAL IND								
TOTAL DEP								
TOTAL CLAIMS								